

Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
METHOD FOR THE MODULATION OF FUNCTION OF TRANSCRIPTION FACTORS

the specification of which

(check one)

☐ is attached hereto.

☐ was filed on _____ as United States Application No. or PCT International Application Number _____

and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

PCT/US99/17366

US

07/30/99

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

I hereby claim the benefit under 35 U.S.C. Section 102(e) of any United States provisional application(s) listed below:

60/094,695	7/30/98
(Application Serial No.)	(Filing Date)
_____	_____
(Application Serial No.)	(Filing Date)
_____	_____
(Application Serial No.)	(Filing Date)

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C. F. R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(list name and registration number)*

Kenneth I. Kohn, Reg. No. 30,955

Amy E. Rinaldo, Reg. No. 45,791

Send Correspondence to: Amy E. Rinaldo, KOHN & ASSOCIATES
30500 Northwestern Highway, Suite 410
Farmington Hills, Michigan 48334
(248) 539-5050

Direct Telephone Calls to: *(name and telephone number)*
Amy E. Rinaldo (248) 539-5050

Full name of sole or first inventor Kenneth S. Zuckerman	
Sole or first inventor's signature	Date
Residence 15610 Cochester Drive, Tampa, Florida 33647	
Citizenship US	
Post Office Address Same as above	

Full name of second inventor, if any Richard Y. Liu	
Second inventor's signature	Date
Residence 18403 Canary Lane, Lutz, Florida 33549	
Citizenship China	
Post Office Address Same as above	

Attorney's Docket Number: 0152.00393Applicant or Patentee: Kenneth S. Zuckerman, et al

Serial or Patent No: _____

Filed or Issued: _____

Title: METHOD FOR THE MODULATION OF FUNCTION OF TRANSCRIPTION FACTORS

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) and 1.27(d))--NONPROFIT ORGANIZATION

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

Name of Organization: University of South FloridaOrganization Address: 4202 East Fowler Avenue - FAO 126Type of Organization: Tampa, Florida 33620-4962

- ☒ University or other Institution of Higher Education
- ☐ Tax exempt under Internal Revenue Service Code
(26 USC 501(a) and 501(c)(3))
- ☐ Nonprofit Scientific or Educational under Statute of State
of the United States of America State: _____
Citation of Statute: _____
- ☐ Would Qualify as Tax Exempt under Internal Revenue
Service Code (26 USC 501(a) and 501(c)(3) if located
in the United States of America State: _____
Citation of Statute: _____

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under Section 41(a) and 41(b) of Title 35, of United States Code with regard to the invention described in:

- ☒ the specification filed herewith with title listed above.
- ☐ the application identified above.
- ☐ the patent identified above.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights in the invention are held by the nonprofit organization (or, exclusive, each individual, concern or organization having rights in the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or nonprofit organization under 37 CFR 1.9(e).

* NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME: University of South Florida Research Foundation, Inc.

ADDRESS: 4202 East Fowler Avenue - FAO 126

Tampa, Florida 33620-4962

☐ Individual ☒ Small Business ☐ Nonprofit Organization

NAME: _____

ADDRESS: _____

☐ Individual ☐ Small Business ☐ Nonprofit Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28(b)]

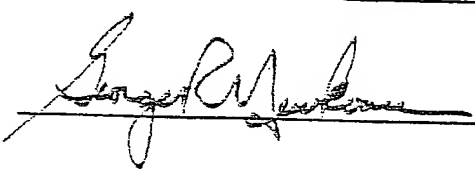
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name of Person Signing: George R. Newkome, Ph.D.

Title in Organization: Vice President for Research

Address of Person Signing: 4202 East Fowler Avenue - FAO 126

Tampa, Florida 33620-4962

SIGNATURE:  Date: 1/1/01

Attorney's Docket Number: 0152.00393

Applicant or Patentee: Kenneth S. Zuckerman, et al
Serial or Patent No: _____
Filed or Issued: _____
Title: METHOD FOR THE MODULATION OF FUNCTION OF TRANSCRIPTION FACTORS

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
[37 CFR 1.9(f) and 1.27(c)] - SMALL BUSINESS CONCERN

I hereby declare that I am:

- _____ the owner of the small business concern identified below:
X an official of the small business concern empowered to
act on behalf of the concern identified below:

Name of Concern: University of South Florida Research Foundation, Inc.
Address of Concern: 4202 East Fowler Avenue - FAO 126
Tampa, Florida 33620-4962

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement: (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when, either directly or indirectly, one concern controls or has the power to control the other, or a third-party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

- X the specification filed herewith with title as listed above.
_____ the application identified above.
_____ the patent identified above.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c), if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

* NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

Each such person, concern or organization having any rights in the invention is listed below:

☐ No such person, concern, or organization exists.

☒ Each such person, concern or organization is listed below.

NAME: University of South Florida

ADDRESS: 4202 East Fowler Avenue - FAO 126

Tampa, Florida 33620-4962

☐ Individual ☐ Small Business ☒ Nonprofit Organization

NAME: _____

ADDRESS: _____

☐ Individual ☐ Small Business ☐ Nonprofit Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28(b)]


I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name of Person Signing: Kenneth G. Preston

Title in Organization: Executive Director

Address of Person Signing: 4202 East Fowler Avenue - FAO 126

Tampa, Florida 33620-4962

SIGNATURE: 

Date: 01/01/01